Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::
Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: ADVANCED THERMOPLASTICS FOR

ORTHODONTICS

Attorney Docket Number:: UCON/204/US

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 14

Small Entity:: Yes

Latin name::

Variety denomination name::

Petition included?::

Petition type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Artie

Middle Name:: J.

Family Name:: GOLDBERG

Name suffix::

City of Residence West Hartford

State or Province of Residence:: CT

Country of Residence:: US

Street of mailing address:: 30 Berwyn Road

City of mailing address:: West Hartford

State or Province of mailing address:: CT

Country of mailing address:: US

Postal or Zip Code of mailing address:: 06107

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Charles

Middle Name:: J.

Family Name:: BURSTONE

Name suffix::

City of Residence Farmington

State or Province of Residence:: CT

Country of Residence:: US

Street of mailing address:: 252 Old Mountain Road

City of mailing address::	Farmington
State or Province of mailing address::	СТ
Country of mailing address::	US
Postal or Zip Code of mailing address::	06032
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name suffix::	
City of Residence	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name suffix::	
City of Residence	
State or Province of Residence::	
Country of Residence::	
Street of mailing address:	

City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	•
Middle Name::	
Family Name::	
Name suffix::	
City of Residence	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name suffix::	
City of Residence	
State or Province of Residence:	

Country of Residence::

Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Correspondence Information	
Correspondence Customer Number::	002543
Name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Phone number::	
Fax number::	
E-Mail address::	email@pctlaw.com
Representative Information	
Representative Customer Number::	002543
Domestic Priority Information	

Parent Application::

60/393,791

Continuity Type::

Non-Provisional of

Application::

This application is

Parent Filing Date::

7/3/02

Foreign Priority Information

Country::	Application number::	Filing Date:	Priority Claimed
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Assignee Information

Assignee name:: University of Connecticut

Street of mailing address:: 263 Farmington Avenue

City of mailing address:: Farmington

State or Province of mailing address:: CT

Country of mailing address:: US

Postal or Zip Code of mailing address:: 06030-6207

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::